

FORM 5. INVOLUNTARY PETITION

INVOLUNTARY
PETITION

Name of Debtor Stanfill, Jacqueline

Case No. _____

B5 (Official Form 5) (12/07) - Page 2

TRANSFER OF CLAIM

☐ Check this box if there has been a transfer of any claim against the debtor by or to any petitioner. Attach all documents evidencing the transfer and any statements that are required under Bankruptcy Rule 1003(a).

REQUEST FOR RELIEF

Petitioner(s) request that an order for relief be entered against the debtor under the chapter of title 11, United States Code, specified in this petition. If any petitioner is a foreign representative appointed in a foreign proceeding, a certified copy of the order of the court granting recognition is attached.

Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.

X/s/ Joey Ducote
Signature of Petitioner or Representative (State title)

Joey Ducote January 21, 2015
Name of Petitioner Date Signed

Name & Mailing Joey Ducote
Address of Individual 1551 Wembley Hills
Signing in Representative Knoxville, TN 37922
Capacity

X/s/ Greg Logue
Signature of Petitioner or Representative (State title)

Dan D'All January 21, 2015
Name of Petitioner Date Signed

Name & Mailing Greg Logue
Address of Individual PO Box 900
Signing in Representative Knoxville, TN 37901-0900
Capacity

X _____
Signature of Petitioner or Representative (State title)

Name of Petitioner Date Signed

Name & Mailing
Address of Individual
Signing in Representative
Capacity

X/s/ Lynn Tarpy January 21, 2015
Signature of Attorney Date

Lynn Tarpy
Name of Attorney Firm (If any) Tarpy, Cox, Fleishman & Leveille, PLLC
1111 N. Northshore Drive
Suite N-290
Knoxville, TN 37919
Address
Telephone No. (865) 588-1096

X/s/ Greg Logue January 21, 2015
Signature of Attorney Date

Greg Logue
Name of Attorney Firm (If any)
PO Box 900
Knoxville, TN 37901-0900
Address
Telephone No. 865-215-1000

X _____
Signature of Attorney Date

Name of Attorney Firm (If any)

Address
Telephone No. _____

PETITIONING CREDITORS

Name and Address of Petitioner <u>Joey Ducote</u> <u>1551 Wembley Hills</u> <u>Knoxville, TN 37922</u>	Nature of Claim Money turned over to Stanfill for retirement and 529 College funds	Amount of Claim 1,166,000.00
Name and Address of Petitioner <u>Dan D'All</u> <u>c/o Greg Logue</u> <u>PO Box 900</u> <u>Knoxville, TN 37901-0900</u>	Nature of Claim Money turned over to Stanfill for retirement	Amount of Claim 766,000.00
Name and Address of Petitioner	Nature of Claim	Amount of Claim
Note: If there are more than three petitioners, attach additional sheets with the statement under penalty of perjury, each petitioner's signature under the statement and the name of attorney and petitioning creditor information in the format above.		Total Amount of Petitioners' Claims 1,932,000.00

0 continuation sheets attached

Name of Debtor Stanfill, Jacqueline

B5 (Official Form 5) (12/07) - Page 2

Case No. _____

TRANSFER OF CLAIM

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REQUEST FOR RELIEF

Petitioner(s) request that an order for relief be entered against the debtor under the chapter of title 11, United States Code, specified in this petition. If any petitioner is a foreign representative appointed in a foreign proceeding, a certified copy of the order of the court granting recognition is attached.

Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.

X/s/ Joey Ducote

Signature of Petitioner or Representative (State title)

Joey Ducote

January 22, 2015

Name of Petitioner

Date Signed

Name & Mailing Address of Individual
Signing in Representative Capacity
Joey Ducote
1551 Wembley Hills
Knoxville, TN 37922

X/s/ Lynn Tarp 006017

January 22, 2015

Signature of Attorney

Date

Lynn Tarp 006017

Name of Attorney Firm (If any)
Tarpy, Cox, Fleishman & Leveille, PLLC
1111 N. Northshore Drive
Suite N-290
Knoxville, TN 37919

Address

Telephone No. (865) 588-1096

X/s/ Greg Logue

Signature of Petitioner or Representative (State title)

Daniel D'All

January 22, 2015

Name of Petitioner

Date Signed

Name & Mailing Address of Individual
Signing in Representative Capacity
Greg Logue
PO Box 900
Knoxville, TN 37901-0900

X/s/ Greg Logue 012157

January 22, 2015

Signature of Attorney

Date

Greg Logue 012157

Name of Attorney Firm (If any)

PO Box 900
Knoxville, TN 37901-0900

Address

Telephone No. 865-215-1000

X/s/ Cary Franklin

Signature of Petitioner or Representative (State title)

Cary Franklin

January 22, 2015

Name of Petitioner

Date Signed

Name & Mailing Address of Individual
Signing in Representative Capacity
3748 Gooseneck Dr.
Knoxville, TN 37920

X/s/ Robert L. Vance 021733

January 22, 2015

Signature of Attorney

Date

Robert L. Vance 021733

Name of Attorney Firm (If any)

PO Box 900
Knoxville, TN 37901-0900

Address

Telephone No. 865-215-1000

PETITIONING CREDITORS

Name and Address of Petitioner <u>Joey Ducote</u> <u>1551 Wembley Hills</u> <u>Knoxville, TN 37922</u>	Nature of Claim <u>Money turned over to Stanfill for retirement and 529 College funds. Money is approximate as reported by Stanfill.</u>	Amount of Claim <u>1,166,000.00</u>
Name and Address of Petitioner <u>Daniel D'All</u> <u>8366 Meadow Pointe Dr</u> <u>Southaven, MS 38672</u>	Nature of Claim <u>Money turned over to Stanfill for retirement. Amount is approximate as reported by Stanfill.</u>	Amount of Claim <u>700,000.00</u>
Name and Address of Petitioner <u>Cary Franklin</u> <u>3748 Gooseneck Dr.</u> <u>Knoxville, TN 37920</u>	Nature of Claim <u>Money turned over to Stanfill for retirement</u>	Amount of Claim <u>45,000.00</u>
Note: If there are more than three petitioners, attach additional sheets with the statement under penalty of perjury, each petitioner's signature under the statement and the name of attorney and petitioning creditor information in the format above.		Total Amount of Petitioners' Claims <u>2,514,000.00</u>

1 continuation sheets attached

Name of Debtor: Stanfill, Jacqueline

B5 (Official Form 5) (12/07) - Page 2

Case No. _____

TRANSFER OF CLAIM

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Petitioner(s) declare under penalty of perjury that the foregoing is true and correct according to the best of their knowledge, information, and belief.

X/s/ Karen A. Franklin
Signature of Petitioner or Representative (State title)

Karen Franklin January 22, 2015
Name of Petitioner Date Signed

Name & Mailing
Address of Individual
Signing in Representative
Capacity

X/s/ Caryn M. Ford President
Signature of Petitioner or Representative (State title)

The Franklin Group, LLC January 22, 2015
Name of Petitioner Date Signed

Name & Mailing
Address of Individual
Signing in Representative
Capacity
3748 Gooseneck Dr
Knoxville, TN 37920

X _____
Signature of Petitioner or Representative (State title)

Name of Petitioner Date Signed

Name & Mailing
Address of Individual
Signing in Representative
Capacity

X/s/ Robert L. Vance 021733 January 22, 2015
Signature of Attorney Date

Robert L. Vance 021733
Name of Attorney Firm (If any)

PO Box 900
Knoxville, TN 37901-0900
Address
Telephone No. 865-215-1000

X/s/ Robert L. Vance 021733 January 22, 2015
Signature of Attorney Date

Robert L. Vance 021733
Name of Attorney Firm (If any)

PO Box 900
Knoxville, TN 37901-0900
Address
Telephone No. 865-215-1000

X _____
Signature of Attorney Date

Name of Attorney Firm (If any)

Address
Telephone No. _____

PETITIONING CREDITORS

Name and Address of Petitioner Karen Franklin 3748 Gooseneck Dr Knoxville, TN 37920	Nature of Claim Money turned over to Stanfill for retirement	Amount of Claim 63,000.00
Name and Address of Petitioner The Franklin Group, LLC 3748 Gooseneck Dr Knoxville, TN 37920	Nature of Claim Money turned over to Stanfill to invest	Amount of Claim 540,000.00
Name and Address of Petitioner	Nature of Claim	Amount of Claim
Note: If there are more than three petitioners, attach additional sheets with the statement under penalty of perjury, each petitioner's signature under the statement and the name of attorney and petitioning creditor information in the format above.		Total Amount of Petitioners' Claims 2,514,000.00

1 of 1 continuation sheets attached